

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3	/					
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46						
47						
48						
49						
50						
TOTAL IND.	9					
TOTAL DEP.	9					
TOTAL CLAIMS	103					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				/	101	
52				/	102	
53			/		103	
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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